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CONFIRMATION NO. 7984

SERIAL NUMBER 09/867,382	FILING OR 371(c) DATE 05/31/2001 RULE	CLASS 604	GROUP ART UNIT 3763	ATTORNEY DOCKET NO. 032304-020
<b>APPLICANTS</b> John F. Shanley, Redwood City, CA;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/315,885 05/20/1999 PAT 6,290,673.				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b>				
** 06/15/2001				
Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 6
Verified and Acknowledged Examiner's Signature _____ Initials _____	INDEPENDENT CLAIMS 1			
<b>ADDRESS</b> Cindy A Lynch Conor Medsystems Inc 1003 Hamilton Court Menlo Park ,CA 94025				
<b>TITLE</b> EXPANDABLE MEDICAL DEVICE DELIVERY SYSTEM AND METHOD				
FILING FEE RECEIVED 655	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		